

Entered -07-23-01 - sb  
CL 01L0468 - GWENDOLYN BURNS

CLAIM OF: ROBERT HAAN  
183 Edgewood Avenue  
Atlanta, Georgia 30303

01-*L*-1549

For property damages alleged to have been sustained from a sewer  
back up on March 1, 2001 at 183 Edgewood Avenue.

THIS ADVERSED REPORT IS  
APPROVED

BY: *Rosalind Rubens Newell*  
ROSALIND RUBENS NEWELL  
DEPUTY CITY ATTORNEY *Rubens Newell DCA*

01-R-1549

## DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 01L0468Date: September 12, 2001Claimant /Victim ROBERT HAAN

BY: (Atty) (Ins. Co.) \_\_\_\_\_

Address: 183 Edgewood Avenue, Atlanta, Georgia 30303Subrogation: \_\_\_\_\_ Claim for Property damage \$ 29,260.08 Bodily Injury \$ \_\_\_\_\_Date of Notice: 7/19/01 Method: Written, Proper X Improper \_\_\_\_\_Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) XDate of Occurrence 3/1/01 - 5/1/01 Place: 183 Edgewood Avenue

Department \_\_\_\_\_ Division \_\_\_\_\_

Employee involved \_\_\_\_\_ Disciplinary Action: \_\_\_\_\_

NATURE OF CLAIM: Claimant sustained property damage from a sewer back up. An investigation determined that a private contractor was boring underneath the street and ruptured claimant's sewer service lateral line which caused the back up to occur. The claimant has been advised of this and his claim has been forwarded to the contractor for resolution.

## INVESTIGATION:

Statements: City employee \_\_\_\_\_ Claimant \_\_\_\_\_ Others X Written \_\_\_\_\_ Oral \_\_\_\_\_Pictures \_\_\_\_\_ Diagrams \_\_\_\_\_ Reports: Police \_\_\_\_\_ Dept Report X Other \_\_\_\_\_

Traffic citations issued: City Driver \_\_\_\_\_ Claimant Driver \_\_\_\_\_

Citation disposition: City Driver \_\_\_\_\_ Claimant Driver \_\_\_\_\_

## BASIS OF RECOMMENDATION:

Function: Governmental \_\_\_\_\_ Ministerial \_\_\_\_\_

Improper Notice \_\_\_\_\_ More than Six Months \_\_\_\_\_ Other X Damages reasonable \_\_\_\_\_City not involved X Offer rejected \_\_\_\_\_ Compromise settlement \_\_\_\_\_

Repair/replacement by Ins. Co. \_\_\_\_\_ Repair/replacement by City Forces \_\_\_\_\_

Claimant Negligent \_\_\_\_\_ City Negligent \_\_\_\_\_ Joint \_\_\_\_\_ Claim Abandoned \_\_\_\_\_

Respectfully submitted,



INVESTIGATOR - GWENDOLYN BURNS

## RECOMMENDATION:

Pay \$ \_\_\_\_\_ Adverse X Account charged: 1A01 \_\_\_\_\_ 2J01 \_\_\_\_\_ 2H01 \_\_\_\_\_Claims Manager:  Concur/date 09-14-01

Committee Action: \_\_\_\_\_ Council Action \_\_\_\_\_

COUNCIL OF THE CITY OF ATLANTA  
MUNICIPAL CLERK,  
City Hall  
55 Trinity Avenue, S.W.  
Atlanta, Georgia 30335

RE: CLAIM FOR DAMAGES

RECEIVED

JUL 19 2001

Today's Date:

7/17/01

BURNS  
07/20/01

Dear Municipal Clerk:

MUNICIPAL CLERK

ENTERED - 7-23-01 - SB  
01L0468 - GWEN BURNS

This is to notify the City of Atlanta, that I have suffered damages in the amount sum of \$ 29,260.08 property and/or  
\$ 0 bodily injury for which I contend the City is liable.

1. Date of incident: 3/1/01 - 5/1/01 2. Time of Incident: N/A 3. Police called: X  
(month/day/year) Yes No

4. Location of incident (including street address): 183 Edgewood Ave

5. Name of your insurance company: PENN-AMERICAN Ins. Co. Policy No. PAC 6056869

6. State what and how incident occurred: Due to drilling under the street level, a pipe was busted and filled my space w/ raw sewage, it took over 2 1/2 mo. to be fixed and/or cleaned up much of which I had to do my self and my people

7. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!

8. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle (copy of the current tag receipt or title).

Your vehicle: N/A  
(Make) (Year) (Tag Number) (Driver's Name)

City vehicle: N/A  
(Make) (City Driver's Name) (Department/Bureau)

9. Witness: ALLEN MOORE 360 Edgewood Ave SE 404.925.8321  
(Name) (Address) (Telephone Number)

10. The acknowledgement of this claim in no way waives the sovereign immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and / or its employee(s).

11. This claim should be mailed immediately to the address shown above.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE  
INFORMATION IS TRUE AND CORRECT.

Robert Naan  
Signature of Claimant

Robert Naan  
(Print Claimant's Name)

183 Edgewood Ave  
(Address)

Atlanta, GA 30303  
(City, State and Zip Code)

404.223.5540 404.925.2298  
(Work Number) (Home Number)

01-R-1549